A Call to Action on The Menopause

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Foreward

The Women’s Equality Network (WEN) Wales aims to create a fairer society in which women and girls can live free from prejudice and gender discrimination and enjoy equality in all aspects of their daily lives. We work to bring the voices of individuals and organisations to decision makers at national and international levels.

Our publications highlight key issues for women and provide an opportunity for direct dialogue between women and decision makers in Wales. The menopause has been identified by our members as an area where women would benefit from more action being taken in relation to the provision of support and advice, especially in the workplace.

We would like to thank Sarah Rees from Career Women Wales for researching this briefing and Welsh Government for the funding that has made our work possible.

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Co-Directors, WEN Wales
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1. Introduction

This briefing paper is a call to action to improve practice in relation to the menopause in Wales. The menopause is a health and wellbeing issue that affects the vast majority of women, but still remains hidden and surprisingly taboo, especially in the workplace.

The menopause is not a disease. It is a natural life-experience for all women in Wales and it affects our lives in a variety of ways. However, the subject of the menopause has been censored in our culture. It is an experience that women tend to keep hidden from public view and deal with on their own. Since the menopause, when it is publicly discussed, is often a trigger for jokes, women may also face increased social embarrassment and fear of ridicule at this time of life.¹ In order to normalise the menopause and empower women, it is essential to be aware of the facts and discuss them openly.

The Welsh Government’s Strategic Equality Plan (SEP) states that the needs of protected groups (including women) should be at the heart of the delivery of health services. However, our research into this area shows that information, advice and support, both for individual women and for employers is inconsistent across Wales.

We hope that this briefing will generate a frank discussion about the menopause by providing facts, outlining key issues and offering recommendations for improving practice in a number of areas.

2. Menopause: The Basics

Most women enter a period known as “perimenopause” anything from a few months to ten years before they experience the menopause. Perimenopause usually starts in a woman's forties, but may start in her thirties, or even earlier. During this time the ovaries gradually begin to make less oestrogen. The drop in oestrogen usually speeds up in the last two years before the actual menopause, causing women to experience menopausal symptoms.

The term “menopause” refers to the time when the ovaries stop producing eggs and a woman no longer has periods. This usually happens between the ages of 45 and 55 and a woman is said to have reached the menopause once she has not had a period for one year. Symptoms of the menopause can last between two to five years².

¹ Department of Health, Chief Medical Officer’s Report (2014) p. 110  
² NHS UK, http://www.nhs.uk/Livewell/menopause/Pages/Menopauseoverview.aspx
What are the common physical symptoms?

Physical symptoms of both perimenopause and the menopause can include hot flushes, sleep disturbance, urinary problems, heavy periods, vaginal dryness, itching and discomfort. Long-term health issues include increased risk of osteoporosis, weight gain and cardiovascular disease. Around 80% of women experience symptoms.

What are the common psychological symptoms?

Psychological symptoms can include depression, fatigue, lack of energy and reduced interest in sex.

Who does the menopause affect?

All of the 1.56 million women living in Wales will be affected at some point in their lives. We are aware that transgender men and women can also experience the menopause with little information available to support them. Transgender men may face early menopause as part of their medical transition and transgender women are often prescribed ‘menopausal’ medication whilst being invisible in the guidance leaflets enclosed and unaware of the symptoms they may face.

Treatment

The main medical treatment for menopausal symptoms is Hormone Replacement Therapy (HRT) which works by topping up the low levels of the oestrogen and progesterone are caused by the menopause. Not all women will want or need to take HRT and there are other treatments and therapies. Women may also benefit from psychological support (e.g., cognitive behavioural therapy) and complementary therapies.

Can the menopause be classed as a disability?

Yes, it can. The medical model of disability is defined as a "physical or mental impairment which has a substantial and long-term adverse effect on a person’s

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4 NHS UK, http://www.nhs.uk/Livewell/menopause/Pages/Menopauseoverview.aspx
6 NHS UK, http://www.nhs.uk/Livewell/menopause/Pages/Menopauseoverview.aspx
7 2011 Census data. The only women who do not experience a medical menopause are those who have had their ovaries removed before puberty, and those transgender women who are not taking any medications that induce menopausal symptoms.
8 Juliet Jacques, ‘Finally, slowly, my body was catching up with my mind’ (2011) http://www.theguardian.com/lifeandstyle/2011/jan/12/transgender-health-and-wellbeing
9 NHS Choices http://www.nhs.uk/Livewell/menopause/Pages/HormoneReplacementTherapy.aspx
10 NHS Direct http://www.nhs.uk/Conditions/Menopause/Pages/Treatment.aspx#
ability to carry out normal day-to-day activities.”\textsuperscript{11} Women who experience severe and long-lasting symptoms could therefore be covered by the medical definition of disability if their symptoms have a more than minor impact on their ability to work and carry out day-to-day activities.

“Mid-life is typically a life stage when women are dealing with demanding life events and responsibilities, such as work, health problems, caring for elderly relatives, bereavement, dealing with adolescent children, and resulting changes in personal roles and social relationships. Within this context menopausal symptoms can cause discomfort, social embarrassment and disruption of sleeping patterns, which impact on quality of life”.

\textit{Chief Medical Officer’s Report} (2014).

3. Where can women find advice and support in Wales?

Nearly three quarters of women seek advice about the menopause.\textsuperscript{12} Many women access their GP in the first instance, or alternatively look to family planning and sexual health clinics for information. In the digital age, we can also expect that a lot of women will look for help online. Women who are experiencing more severe symptoms may look for specialist advice and expertise.

“Our research has found that there are inconsistencies in relation to which Health Boards and Family Planning clinics provide menopause support in Wales. Age Cymru has produced an informative booklet on Sexual Health, which is available

\textsuperscript{11} NUT, \textit{Teachers Working Through the Menopause}, (2014)
\textsuperscript{12} Annual Report of the Chief Medical Officer (2014)
online or hard copy by request. This features a dedicated section on the menopause but lacks guidance on further links for support.¹³

- Menopause UK

Menopause UK states that Wales has a single specialist menopause clinic, but after making enquiries WEN Wales has been unable to confirm the existence of this clinic. At present it would seem that Wales is lagging behind in provision of specialist NHS menopause clinics (data from Menopause UK):¹⁴

<table>
<thead>
<tr>
<th>Country</th>
<th>No. of NHS Specialist Clinics</th>
<th>No. of women they serve</th>
<th>Average women per clinic</th>
</tr>
</thead>
<tbody>
<tr>
<td>England</td>
<td>18 clinics</td>
<td>8.6 million</td>
<td>210,000</td>
</tr>
<tr>
<td>Scotland</td>
<td>9 clinics</td>
<td>882,000</td>
<td>101,000</td>
</tr>
<tr>
<td>Northern Ireland</td>
<td>1 clinic</td>
<td>307,000</td>
<td>307,000</td>
</tr>
<tr>
<td>Wales</td>
<td>1 clinic</td>
<td>510,000</td>
<td>510,000</td>
</tr>
</tbody>
</table>

- NHS Wales

The response from NHS Direct Wales is as follows:

“Menopause Matters is an accredited resource we use, however, there seems to be technical issues with the website at present. We would suggest you contact them via email for further information on any specialist menopause clinics in Wales.”¹⁵

- The British Menopause Society

The British Menopause Society has informed us that they are currently compiling a list of services provided by their members who are practising in Wales. This will be accessible on the British Menopause Society, Women’s Health Concern and Menopause Matters websites. In this way, women and their partners, families and carers will be able to identify menopause specialists in their area and ask for referrals from their GPs.

¹⁴ Menopause UK https://menopauseuk.org/
¹⁵ NHS Direct Wales
4. Women, Work and the Menopause

There are more women in the workplace than ever before and they are working longer: women have “responsibilities for home and family as well as holding jobs that require commitment and a public presence”. There are currently 168,000 women aged 50-65 in employment in Wales. This figure is a substantial increase on previous years, seeing a 9.4% rise in this age group between 2008 and 2012.

When you consider the fact that around 80% of the 168,000 women of menopausal age, who are working in Wales, will experience at least some of the symptoms listed earlier, you can appreciate that this is a significant issue that needs to be addressed proactively.

Employers have a duty not to discriminate under The Equality Act (2010). Treating women less favourably because they are experiencing the menopause could therefore be considered sex, age or disability discrimination depending on the nature of the case.

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“My experience is that published information on the menopause is highly over simplified and focuses on high incidence physical issues such as night sweats and flushes. There is much more to it.”

*Anonymous, WEN Member*

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“*Our Female Police Association has set up a number of menopause information days for police officers, beginning in March 2016.*”

*Police and Crime Commissioner for South Wales.*

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16 Margaret E. Morris MSc & Anthea Symonds (2004) ‘We’ve been trained to put up with it’: real women and the menopause, *Critical Public Health*, 14:3, 311-323, DOI: 10.1080/09581590400004436


The TUC has long argued that the menopause is a workplace health and wellbeing issue that is all too often overlooked by employers. A recent survey carried out by the British Occupational Health Research Foundation (BOHRF) found that 70% of women surveyed had not disclosed to their manager the fact that they were experiencing symptoms relating to the menopause. The report also found that workplaces were not designed with the menopause in mind, that the majority of women wanted advice and support, and that women often found that the working environment made their symptoms worse. Women developed their own coping strategies to manage in the workplace. Further research has similar findings, including the TUC and National Union of Teachers among others.

The Public Health Wales ‘Corporate Health Standard’ criteria lists the menopause as an issue which can be effectively targeted in the workplace. However, their website and the UK-wide equivalent do not currently provide information for employers or employees on the menopause.

4.1. What Needs to Change in the Workplace?

So what needs to change, and what adjustments do employers need to put into place? 75% of respondents in the BOHRF report said it would help if their manager was more aware of the issue. Again, we come back to the taboo. Unless we talk about the menopause openly and normalise it in the workplace, cultural myths will be upheld and women will continue to suffer in silence.

“I was acutely aware that no one in work spoke about the menopause, although there were several women in their 50s and 60s who must have worried about sweating and flushing or struggling in meetings. I thought about how this undermined their confidence or their will to get promotion at an age when their pension could benefit from a boost – like my pension did.”

Anonymous, WEN member.

19 Amanda Griffiths, Sara MacLennan & Yin Yee Vida Wong, *Women’s Experience of Working Through the Menopause*, University of Nottingham/British Occupational Health Research Foundation (2010)

20 See [http://www.healthyworkingwales.wales.nhs.uk](http://www.healthyworkingwales.wales.nhs.uk) and [http://fitforwork.org](http://fitforwork.org)
The Chief Medical Officer for England, Dame Sally Davies, has said that “The great taboo of menopause should be discussed between employers and female workers as openly as any other issue”.  

ACAS, the Non-Departmental-Public-Body which provides impartial advice for employers and employees on workplace relations, provide some basic facts on the menopause and directs employers to its guidance on “managing difficult conversations”. The fact that the menopause is listed as a source of “difficult conversations” again points to the taboo around this natural life experience for women. The menopause should not be difficult to talk about in the workplace.

The HSE, the national independent watchdog for work-related health, safety and illness provide general advice on health and safety for older workers, but nothing on the menopause, instead referring users to advice from ACAS.

“...The menopause is becoming a bigger issue for policing as more female officers are approaching menopausal age. There is clearly a need for us to better understand it and manage the impact it has.”

**Police and Crime Commissioner for South Wales**

WEN Wales is particularly concerned to find that women may be penalised at work due to employer lack of awareness about this issue. A 2011 TUC seminar reported cases of disciplinary action being taken against women due to poor performance or sickness absence from the workplace, when these absences were in fact due to menopausal symptoms. Cultural attitudes and ignorance about the menopause mean that women may not be disclosing what can be health issues and may be suffering severe consequences as employees. The BOHRF report found that only half of respondents had disclosed the real reason for their sickness absence to their employers. It may also be the case that symptoms could be effectively managed through other means than sickness absence if the issue were being proactively addressed in the workplace. Some WEN members have told us that they think the menopause should be addressed through flexible working policies rather than through sickness policies.

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22 Age Immaterial: *Women Over 50 in the Workplace*, TUC 2014
5. Recommendations

Our recommendations outline the action we believe needs to be taken to end the silence around the menopause and ensure that women in Wales are not disadvantaged and do not experience discrimination during this time in their lives.

1. Create an information guide for women in Wales, including where to get support and advice on the menopause and what to do if they are experiencing any discrimination related to the menopause.

2. Create a good practice guide for employers in Wales which encourages them to be proactive, ensure all line managers are trained and aware of the menopause as a major health and life change for women, and stop leaving individual women with the responsibility for starting the discussion.

3. Work with health providers to ensure that service providers and policy makers make advice on the menopause accessible and easily available for all women in Wales.

4. Lobby public bodies to lead the way in best practice to support the needs of menopausal women, such as flexible working and considering the menopause in risk assessments at work.

5. Encourage a Welsh campaign to talk about ‘the last taboo’. We must all talk openly about the menopause in order to change cultural norms and encourage better understanding by all.

6. Ensure Public Health Wales addresses the lack of data they provide on the menopause, and invite Welsh Government to address the inequality of access to specialist Menopause clinics.

“I told my division head and he was totally fine with it. I felt that he had never been confronted by a woman saying ‘I am going through the menopause’. It was a challenge to sit down and tell managers who could affect me negatively, but neither did, and that meant a lot to me. Expecting discrimination, I found none.”

Anonymous member of WEN Wales.
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